_	the amount of \$_ by credit card (Form PTO-2038 enclosed)	enclosed			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED					
Name (Print /Type)	Samuel E. Webb	Registration No. (Attorney/Agent) 44,394			
Signature	Aunul heht	Date 9/6/02			
CERTIFICATE OF MAILING OR TRANSMISSION					

The Director is hereby authorized to charge the following fees, or credit any overpayments, to

Deposit Account No.01-1173

X RCE fee required under 37 C.F.R. § 1.17(e) Extension of time fee (37 C.F.R. §§ 1.136 and 1.17)

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, Box RCE, Washington, DC 20231, or facsimile transmitted to the U.S. Patent and Trademark

Office on:	· ·		
Name (Print/Type)	Elizabeth Grannell		
Signature	Elizabeth Drannell	Date September 9, 2002	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time—you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Assistant Commissioner for Patents, Box RCE, Washington, DC 20231.